333211

DOTTA

2553_/

pron!

Notice: This report is required by 49 CFR Part 191. Failure to report may result in a civil penalty not to exceed \$100,000 for each violation for each day the violation continues up to a maximum of \$1,000,000 as provided in 49 USC 60122.

Form Approved OMB No. 2137-0522 Expires: 10/31/2017



U.S. Department of Transportation Pipeline and Hazardous Materials Safety Administration

ANNUAL REPORT FOR CALENDAR YEAR 2015 NATURAL OR OTHER GAS TRANSMISSION and GATHERING SYSTEMS

L.A	olies. 10/5 1/2017
Initial Date Submitted	03/16/2016
Report Submission Type	INITIAL
Date Submitted	

A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The OMB Control Number for this information collection is 2137-0522. Public reporting for this collection of information is estimated to be approximately 22 hours per response, including the time for reviewing instructions, gathering the data needed, and completing and reviewing the collection of information. All responses to this collection of information are mandatory. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, PHMSA, Office of Pipeline Safety (PHP-30) 1200 New Jersey Avenue, SE, Washington, D.C. 20590.

Important: Please read the separate instructions for completing this form before you begin. They clarify the information requested and provide specific examples. If you do not have a copy of the instructions, you can obtain one from the PHMSA Pipeline Safety Community Web Page at http://www.phmsa.dot.gov/pipeline/library/forms.

PART A - OPERATOR INFORMATION	DOT USE ONLY	20164900 - 31630
OPERATOR'S 5 DIGIT IDENTIFICATION NUMBER (OPID) 30666	2. NAME OF OPER ENMARK ENE IF SUBSIDIARY,	RGY, INC NAME OF PARENT:
3. RESERVED	4. HEADQUARTER 104 FIRST CHOICI Street Address MADISON City State: MS Zip Code	E DRIVE

5. THIS REPORT PERTAINS TO THE FOLLOWING COMMODITY GROUP: (Select Commodity Group based on the predominant gas carried and complete the report for that Commodity Group. File a separate report for each Commodity Group included in this OPID.)

Natural Gas

6. RESERVED

7. FOR THE DESIGNATED "COMMODITY GROUP", THE PIPELINES AND/OR PIPELINE FACILITIES INCLUDED WITHIN THIS OPID ARE: (Select one or both)

INTERstate pipeline – List all of the States and OSC portions in which INTERstate pipelines and/or pipeline facilities included under this OPID exist. **ALABAMA**, **TENNESSEE** etc.

INTRAstate pipeline – List all of the States in which INTRAstate pipelines and or pipeline facilities included under this OPID exist. **ARKANSAS**, **MISSISSIPPI**, **TEXAS**, **WEST VIRGINIA** etc.

8. RESERVED

For the designated Commodity Group, complete PARTs B, C, D, and E one time for all pipelines and/or pipeline facilities – both INTERstate and INTRAstate - included within this OPID.

PART B - TRANSMISSION PIPELINE HCA MILES						
	Number of HCA Miles					
Onshore	1.61					
Offshore	0					
Total Miles	1.61					

PART C - VOLUME TRANSPORTED IN TRANSMISSIO PIPELINES (ONLY) IN MILLION SCF PER YEAR (excludesTransmission lines of Gas Distribution syst	☐ includes gathering p	do not complete PART C if this report only pipelines or transmission lines of gas s.
	Onshore	Offshore
Natural Gas	16749296	
Propane Gas		
Synthetic Gas		
Hydrogen Gas		
Landfill Gas		
Other Gas - Name:		

	Steel Cathodically protected									
	Bare	Coated	Bare	Coated	Cast Iron	Wrought Iron	Plastic	Composite ¹	Other	Total Miles
Transmission										
Onshore	0	84.06	0	0	0	0	6.33	0	0	90.39
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Transmission	0	84.06	0	0	0	0	6.33	О	0	90.39
Gathering										
Onshore Type A	0	0	0	0	0	0	0	0	0	0
Onshore Type B	0	0	0	0	0	0	0	0	0	0
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Gathering	0	0	0	0	0	0	0	Name 0 000	0	0
Total Miles	0	84.06	0	0	0	0	6.33	0	0	90.39

¹Use of Composite pipe requires a PHMSA Special Permit or waiver from a State

PART E - Reserved. Data for Part E has been merged into Part D for 2010 and 2011 Annual Reports.

Decade Pipe Installed	Unknown	Pre-40	1940 - 1949	1950 - 1959	1960 - 1969	1970 - 1979
Transmission						
Onshore	0	0	0	0	0	0
Offshore	0	0	0	0	0	0
Subtotal Transmission	0	0	0	0 85	0	0
Gathering						
Onshore Type A	0	0	0	0	0	0
Onshore Type B	0	0	0	0	0	0
Offshore	0	0	0	0	0	0
Subtotal Gathering	0	0	0	0	0	0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Total Miles	0	0	0	0	0	0
Decade Pipe Installed	1980 - 1989	1990 - 1999	2000 - 2009	2010 - 2019		Total Miles
Transmission						
Onshore	40	0	.3	8,33		48.63
Offshore	0	0	0	0		0
Subtotal Transmission	40	0	3	8.33		48.63
Gathering						
Onshore Type A	0	0	0	0		0
Onshore Type B	0	0	0	0		0
Offshore	0	0	0	0		0
Subtotal Gathering	0	0	0.	0		0
Total Miles	40	0	.3	8.33		48.63

ONGHODE		Total Miles			
ONSHORE	Class I	Class 2	Class 3	Class 4	1
Steel pipe Less than 20% SMYS	2	0	0	0	2
Steel pipe Greater than or equal to 20% SMYS but less than 30% SMYS	0	0	0	0	0
Steel pipe Greater than or equal to 30% SMYS but less than or equal to 40% SMYS	0	3	4	0	7
Steel pipe Greater than 40% SMYS but less than or equal to 50% SMYS	33.3	0	0	0	33.3
Steel pipe Greater than 50% SMYS but less than or equal to 60% SMYS	0	0	0	0	0
Steel pipe Greater than 60% SMYS but less than or equal to 72% SMYS	0	0	0	0	0
Steel pipe Greater than 72% SMYS but less than or equal to 80% SMYS	0	0	0	0	0
Steel pipe Greater than 80% SMYS	0	0	0	0	0
Steel pipe Unknown percent of SMYS	0	0	0	0	0
All Non-Steel pipe	6.33	0	0	0	6.33
Onshore Totals	41.63	3	4	0	48.63

	 03. 10/0 1/2011
Class I	
41.63	48.63
	Class I

PART L - MILES OF PIPE BY CLASS LOCATION

		Class L	Total Class Location	HCA Miles in the IMP		
	Class I	Class 2	Class 3	Class 4	Miles	Program
Transmission						
Onshore	41.63	3	4	0	48.63	.58
Offshore					2 W 2 5 5 5 10 1	
Subtotal Transmission	41.63	3	4	0	48.63	
Gathering						
Onshore Type A						
Onshore Type B						
Offshore		<u> </u>				
Subtotal Gathering			S. Marylan	Uning HOVE		
Total Miles	41.63	3	4	0	48.63	.58

PART M - FAILURES, LEAKS, AND REPAIRS

PART M1 - ALL LEAKS ELIMINATED/REPAIRED IN CALENDAR YEAR; INCIDENTS & FAILURES IN HCA SEGMENTS IN CALENDAR YEAR

		Transmissi	on Leaks	, and Failures	Gathering Leaks			
		Lea	ıks		Failures in	Onshor	e Leaks	Offshore Leaks
	Onsh	ore Leaks	Offsh	ore Leaks	HCA			
Cause	HCA	Non-HCA	HCA	Non-HCA	Segments	Type A	Type B	
External Corrosion	0	0	0	0	0			
Internal Corrosion	0	0	0	0	0		<u> </u>	
Stress Corrosion Cracking	0	0	0	0	0			
Manufacturing	0	0	0	0	0			
Construction	0	0	0	0	0			
Equipment	0	0	0	0	0			
Incorrect Operations	0	0	0	0	0			
Third Party Damage/Mecha	anical Da	amage					S Esperator	
Excavation Damage	0	0	0	0	0			
Previous Damage (due to Excavation Activity)	0	0	0	0	0			
Vandalism (includes all Intentional Damage)	0	0	0	0	0			
Weather Related/Other Ou	tside Fo	rce	4-1463		MB STORY		ne na Wa Y	
Natural Force Damage (all)	0	0	0	0	0			
Other Outside Force Damage (excluding Vandalism and all Intentional Damage)	0	0	0	0	0			
Other	0	0	0	0	0			
Total	0	0	0	0	0	311 1/8	militan 246	NOT REPORTED IN

Notice: This report is required by 49 CFR Part 191. Failure to report may result in a civil penalty not to exceed \$100,000 for each violation for each day the violation continues up to a maximum of \$1,000,000 as provided in 49 USC 60122.

Form Approved OMB No. 2137-0522 Expires: 10/31/2017

RED OR SCHEDULED FOR REPA
Gathering
re Type A
ore Type B
btotal Gathering

	Steel Cathodically protected									
	Ваге	Coated	Bare	Coated	Cast Iron	Wrought Iron	Plastic	Composite ¹	Other ²	Total Miles
Transmission										
Onshore	0	42,3	0	0	0	0	6.33	0	0	48.63
Offshore	0	0	0	0	0	0	0	0	0	0
Subtotal Transmission	0	42.3	0	0	0	0	6.33	0	0	48.63
Gathering										
Onshore Type A	0	0	0	0	0	0	0	0	0	0
Onshore Type B	0	0	0	0	0	0	0	0	0	0
Offshore	0	0	0	0	0	0	0	0		0
Subtotal Gathering	0	0	0	0	0	0	0	0	0	0
Total Miles	0	42.3	0	0	0	0	6.33	0	0	48.63

¹Use of Composite pipe requires PHMSA Special Permit or waiver from a State ²specify Other material(s):

	()(4)	()(4)	4 1/01	()(0)	(-V0)	(-)(0)	/- \/A\	(-)(4)	(a)	(0)	(d)	(d)	Other ¹	Other
	(a)(1) Total	(a)(1) Incomplete Records	(a)(2) Total	(a)(2) Incomplete Records	(a)(3) Total	(a)(3) Incomplete Records	(a)(4) Total	(a)(4) Incomplete Records	(c) Total	(c) Incomplete Records	(d) Total	(d) Incomplete Records	Total	Incomplete Records
Class 1 (in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 1 (not in HCA)	35.3		6,33		0		0		0		0		0	
Class 2 (in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 2 (not in HCA)	3		0		0		0		0		0		0	
Class 3 (in HCA)	.58	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 3 (not in HCA)	3.42	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 4 (in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Class 4 (not in HCA)	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total	42.3	0	6.33	0	0	0	0	0	0	0	0	0	0	0
Grand Total			N. I.			Л	0411	48.63						·
Sum of Total row for all "Incomplete Records" columns						0	1							

¹ Specify	Other	method	(s)):
----------------------	-------	--------	-----	----

Class 1 (in HCA)	Class 1 (not in HCA)	
Class 2 (in HCA)	Class 2 (not in HCA)	
Class 3 (in HCA)	Class 3 (not in HCA)	
Class 4 (in HCA)	Class 4 (not in HCA)	

Part R – Gas Transm	nission Miles b	y Pressure Test ((PT) Range an	d Internal Inspection			
	PT ≥ 1.25 MAOP		1.25 MAO	P > PT ≥ 1.1 MAOP	PT < 1.1 or No PT		
Location	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	Miles Internal Inspection ABLE	Miles Internal Inspection NOT ABLE	
Class 1 in HCA	0	0	0	0	0	0	
Class 2 in HCA	0	0	0	0	0	0	
Class 3 in HCA	.58	0	0	0	0	0	
Class 4 in HCA	0	0	0	0	0	0	
in HCA subTotal	.58	0	0	0	0	0	
Class 1 not in HCA	35.3	6.33	0	0	0	0	
Class 2 not in HCA	3	0	0	0	0	0	
Class 3 not in HCA	3.42	0	0	0	0	0	
Class 4 not in HCA	0	0	0	0	0	0	
not in HCA subTotal	41.72	6.33	0	0	0	0	
Total	42.3	6.33	0	0	0	0	
PT ≥ 1.25 MAOP Total			48.63	Total Miles Internal Inspection ABLE		42.3	
1.25 MAOP > PT ≥ 1.	1 MAOP Total		0	Total Miles Internal Inspection NOT ABLE		6.33	
PT < 1.1 or No PT To	tal		0		Grand Total	48.63	
		Grand Total	48.63				

For the designated Commodity Group, complete PART N one time for all of the pipelines and/or pipeline facilities included within this OPID, and then also PART O if any gas transmission pipeline facilities included within this OPID have Part L HCA mile value greater than zero.

PART N - PREPARER SIGNATURE	
Jeff Tharpe	(601) 898-2434 Telephone Number
Preparer's Name(type or print)	
Operations Manager	
Preparer's Title	
jtharpe@enmarkenergy.com	
Preparer's E-mail Address	

	Telephone Number
Connell Rader	
senior Executive Officer's name certifying the information in PARTs B, F, G, and M as required by 9 U.S.C. 60109(f)	
President	
enior Executive Officer's title certifying the information in PARTs B, F, G, and M as required by 9 U.S.C. 60109(f)	
rader@enmarkenergy.com	